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Bib Data Sheet

CONFIRMATION NO. 1326

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------|--------------------------------------|--------------------------------|
| SERIAL NUMBER 09/964,894 | FILING DATE 09/28/2001 RULE | CLASS 623 | GROUP ART UNIT 3738 | ATTORNEY DOCKET NO. 011307 | |
| APPLICANTS Toru Takehisa, Chiba, JAPAN; Kazunari Sakai, Chiba, JAPAN; Susumu Kashiwabara, Shiga, JAPAN; Hidenori Tanaka, Shiga, JAPAN; Masaki Satoh, Shiga, JAPAN; Hisateru Takano, Osaka, JAPAN; Yoshiyuki Taenaka, Osaka, JAPAN; Eisuke Tatsumi, Osaka, JAPAN; Tomohiro Nishinaka, Osaka, JAPAN; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/29/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged | Allowance <i>[Signature]</i> 10/10/03 Examiner's Signature Initials | STATE OR COUNTRY JAPAN | SHEETS DRAWING | TOTAL CLAIMS 3 | INDEPENDENT CLAIMS 1 |
| ADDRESS 23850 | | | | | |
| TITLE Artificial lung of membrane type | | | | | |
| FILING FEE RECEIVED 870 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | | |
| | | <input type="checkbox"/> All Fees | | | |
| | | <input type="checkbox"/> 1.16 Fees (Filing) | | | |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | | | |
| | | <input type="checkbox"/> 1.18 Fees (Issue) | | | |
| | | <input type="checkbox"/> Other _____ | | | |
| | | <input type="checkbox"/> Credit | | | |